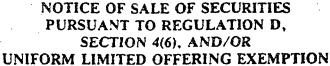
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D







133228

SEC USE ONLY

DATE RECEIVED

Serial

Prefix

FIR The of		
Name of Offering ( check if this is an amendment and name has changed, and i Offering of Membership Interest of Energy Development Group, LLC		
Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 506	Section 4(6) U	OEN RECEIVED
Type of Filing:  New Filing  Amendment	·	<u> </u>
A. BASIC IDENTIFICATION DATA		/ a 4 7005
1. Enter the information requested about the issuer	, ·	, JUN DO
Name of Issuer ( check if this is an amendment and name has changed, and indi- Energy Development Group, LLC	rate change.)	Though and the
Address of Executive Offices (Number and Street, City, State, Zip Code)  1 Magnolia Lane Thomasville, North Carolina 27360	Telephone Number (Inch (336) 454-5665	iding Area Code
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Inch	iding Area Code)
Brief Description of Business		and the second s
Research and development regarding the design and fabrication of a byproduct of which is anticipated to be useful and controlled energ	nuclear fusion boiler, in the form of heat.	the
Type of Business Organization  Corporation  I limited partnership, already formed	EX other (please specify):	• • • • • • • • • • • • • • • • • • • •
☐ business trust ☐ limited partnership, to be formed	limited liability c	ompany
Actual or Estimated Date of Incorporation or Organization:    Month Year		NC
GENERAL INSTRUCTIONS		49
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption u et seq. or 15 U.S.C. 77d(6).	nder Regulation D or Section	n 4(6), 17 CFR 230.501
When To File: A notice must be filed no later than 15 days after the first sale of secur the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is re if received at that address after the date on which it is due, on the date it was mailed by Uni	ceived by the SEC at the a-	idress given below or,
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Wi	shington, D.C. 20549.	•
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which signed must be photocopies of the manually signed copy or bear typed or printed sign	nust be manually signed. A	ny copies not manually
Information Required: A new filing must contain all information requested. Amendment		of the issuer and offer-

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director XX General and/or Managing Partner Full Name (Last name first, if individual) Tibbals, Jr., Edward Camp Business or Residence Address (Number and Street, City, State, Zip Code) Thomasville, North Carolina 27360 1 Magnolia Lane Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Schenck, James Business or Residence Address (Number and Street, City, State, Zip Code) Winston-Salem, North Carolina 27106 2424 Merrimont Drive ☐ General and/or ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Codé) ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director ☐ General and/or D Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director □ General and/or

(Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

Business or Residence Address

Managing Partner

	<u> </u>		THE WAR	INFORMA	A NOIT	OUT OF	ERING	1				
1. Has	the issuer sold,	or does the	issuer intend	i to sell, to	non-accr	edited inve	stors in th	is offering	?. <b></b>	•••••	Yes ⊠	No D
			Answer also	in Append	lix, Colum	ın 2, if fili	ng under l	JLOE.				
2. Wha	at is the minimu	m investmen	t that will b	e accepted	from any	individual	?	• • • • • • •		• • • • • • • • •	. <u>s_10</u>	,000
3. Doe	es the offering pe	ermit joint o	wnership of	a single un	uit?						Yes . D	No 🖄
4. Ente	er the informatio	n requested f	or each perso	on who has	been or w	ill be paid	or given, di	rectly or in	directly, a	ny commi	<b>S-</b>	
to b	or similar remure e listed is an asset the name of the lealer, you may t	ociated perso broker or de	n or agent o aler. If more	f a broker than five	or dealer : (5) person	registered v s to be list	with the SE ed are asso	C and/or	with a stat	e or states	s,	
Full Nam	e (Last name fir	st, if individ	ual)						<u> </u>			
N/A			• •	•								
Business of	or Residence Ad	dress (Numb	er and Stree	t, City, St	ate, Zip C	ode)					<u></u>	
Name of	Associated Brok	er or Dealer		·	· · · · · · · · · · · · · · · · · · ·			<del></del>				<del></del>
States in	Which Person L	isted Has So	licited or In	tends to So	olicit Purc	hasers						
(Check	"All States" or	check indivi	duai States)				•••••				□ All S	States
[AL]	[AK] [A	Z] [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	1
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[RI]	[SC] [SI e (Last name fir			(UT)	[VT]	[VA]	[WA]	[WV]	[ WI ].	[WY]	[PR]	<u> </u>
	or Residence Ad		er and Stree	t, City, Sta	ate, Zip C	ode)						
Name of	Associated Brok	er or Dealer						•	****			
	·								·		· 	
	Which Person L				olicit Purc	hasers						•
	"All States" or		, .					· · · · · · · · · · · · · · · · · · ·			D All S	
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[RI]	[SC] [S			[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[YY]	PR	
Full Nam	e (Last name fir	st, if individ	ual)									
Dusinger	or Residence Ad	deace (Numb	on and Cana	. Circ Cr	-1- 7:- C		<u> </u>			<del></del>		
Dusiness (	or Residence Ad	aress (realino	ei and Stree	a, Chy, Su	ace, zip C	ode)						
Name of	Associated Brok	er or Dealer										
			•									
States in	Which Person L	isted Has So	licited or In	tends to So	olicit Purc	hasers			<del></del>			
(Check	"All States" or	check indivi	dual States)		• • • • • • • • • •							States
[AL]		Z] [AR	-	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ ID	}
[IL]		A] [KS	[KY]		[ME]		[MA]		[MN]	[MS]		
[MT]		IV] [NH		•	-	[NC]		[OH]	[OK]	, (OR)		
[RI]	[SC] [S	D] [TN	] [TX]	[UT]	[ TV ]	[ VA ]	[WA]	[WV]	[WI]	· [WY]	[PR	Í

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ...... □ Common □ Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify Membership Interest ) \$ 150,000 150,000 150,000 150,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors 50,000 10 . 100,000 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Security Type of offering Rule 505 Regulation A..... Rule 504..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Engineering Fees Sales Commissions (specify finders' fees separately)...... Other Expenses (identify) Total....

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OSPERING PRICE: NUM	BER OF INVESTORS, EXPENSES ANI	VINCE OF BE	OFFERE
b. Enter the difference between the aggregate tion I and total expenses furnished in response "adjusted gross proceeds to the issuer."	offering price given in response to Part C -	Ques-	\$-150,000
<ol> <li>Indicate below the amount of the adjusted gro used for each of the purposes shown. If the ar estimate and check the box to the left of the esti the adjusted gross proceeds to the issuer set for</li> </ol>	mount for any purpose is not known, furn mate. The total of the payments listed must	iish an t equal	$\frac{d}{dt} = \frac{dt}{dt}$
		Paymo Offi Direct	ents to cers, ors, & Payments To liates Others
Salaries and fees		. 🖒 S	c s
Purchase of real estate		. o s	🗆 s
Purchase, rental or leasing and installation	of machinery and equipment	. 🗆 \$	o s
Construction or leasing of plant buildings a			
Acquisition of other businesses (including to offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this the assets or securities of another		
Repayment of indebtedness	• • • • • • • • • • • • • • • • • • • •	. 🗆 \$	D \$
Working capital	e de julius de les estes de la programa de la despué de la companya de la companya de la referencia	. D S	<u>∞ 🛱 \$150,000 ∞.</u>
Other (specify):		\$	O \$
		_	
		. 🗅 s	D \$
Column Totals			
Total Payments Listed (column totals adde	d)		\$ 150,000
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed ollowing signature constitutes an undertaking by the uest of its staff, the information furnished by the	he issuer to furnish to the U.S. Securities a	ind Exchange	Commission, upon written re
ssuer (Print or Type)	- ·		Date
Energy Development Group, LLC	Signature & Cam Tob mal	5 J x	6-6-2005
lame of Signer (Print or Type)	Title of Signer (Print or Type)	······	
E. Cam Tibbals, Jr.	Manager	· _ · · ·	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

了是,我们可以是一个人的,是 <mark>是不是</mark> 是这种意思。	E. STATE SIGNATURE	
1. Is any party described in 17 CFR 230.252(e), of such rule?	(d), (e) or (f) presently subject to any of the disqualit	fication provisions Yes No
See A	appendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes to f Form D (17 CFR 239.500) at such times as re	urnish to any state administrator of any state in which equired by state law.	this notice is filed, a notice on
<ol> <li>The undersigned issuer hereby undertakes to friesuer to offerees.</li> </ol>	urnish to the state administrators, upon written reques	t, information furnished by the
	ter is familiar with the conditions that must be satisfied the in which this notice is filed and understands that the ling that these conditions have been satisfied.	
The issuer has read this notification and knows the indersigned duly authorized person.	contents to be true and has duly caused this notice to	be signed on its behalf by the
ssuer (Print or Type) Energy Development Group, LLC	Signature C Child In	Date 6-6-2005
Name (Print or Type) E. Cam Tibbals, Jr.	Title (Print or Type)  Manager	

### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1600 1000 1000

1	1	2	3	4 5					
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)			under Sta (if yes, explana waiver	ification ate ULOE attach ation of granted) -Item1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	16	140		184521012	Amount	INTESTOLS	Amount	10	140
AK			A .						
AZ				V 1980 B				<del></del>	
AR		4		12.			٠	·	
CA			i de Sperii - Pi Naperii - e						
со									
СТ	-	,							
DE		-							
DC									
FL	X		LLC Membership Interest-\$150,000			11	\$10,000		Х
GA			10,00					·	
Hl									
ID									
IL	·							·	
IN									
ΙA									
KS									
KY				,					
LA									
ME									
MD	Х		LLC Membership Interest-\$150,000			3	\$30,000		Х
MA					· · · ·				
MI						·		ļ	
MN									
MS									
МО									

1		2	3			4			5
	Intend to non-a investor	I to sell accredited s in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE						والقهد مي ا	*		
NV					ga . e e	enge media e e e e		~.	
NH					g-by	Section 1993			
ŊJ									
NM		·					<u> </u>		
NY									
NC	Х		LLC Membership Interest-\$150,000	1	\$10,000	2	\$20,000		Х
ND						40.55.0	.*.		
он			,			·			
OK									·
OR						Marin Coppe Miles (New York Coppe )			
PA	Х		LLC Membership Interest-\$150,000	4	\$40,000	4	\$40,000	,e	X
RI						g sa			
sc							•	يه د د	
SD									
TN		·					and the second		
ТX									
UT							<u> </u>		· .
VT			·						
VA									
WA									
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wı									
WY									
PR									

# CORPORATE ACKNOWLEDGEMENT

STATE OF	
COUNTYOF	
On this day of, 19 before me	the undersigned officer,
personally appeared known personally to me to be the	(Title) of the
personally appeared known personally to me to be the above named corporation and acknowledged that he, as cuted the foregoing instrument for the purposes therein corporation by himself as an officer.	an officer being authorized so to do, exe- contained, by signing the named of the
IN WITNESS WHEREOF I have hereunto set my hand and off	ficial seal.
(SEAL)	Notary Public/Commissioner of Oaths
	My Commission Expires
INDIVIDUAL OR PARTNERSHIP	ACKNOWLEDGEMENT
STATE OF North Carolina	•
COUNTY OF Guilford	
On this day of, 19 2005 before me E. Cam I personally appeared to me personally known and known name(s) is (are) signed to the	(little) of the above
named corporation and acknowledged foregoing instrui	ment, and acknowledged the execution
thereof for the used and purposed therein set forth.	$\alpha = \alpha \cdot 11 \cdot 1$
IN WITNESS WHEREOE	Notary Public/Commissioner of Oaths
I have a sunto set OFFICIAL SEAL official seal, Notary Public, North Carolina County of Guillord	11/18/2008
CYNTHIA HARRINGTON My Commission Explice November 18, 2008	My Commission Expires
Instructions to Form U-2 - Uniform Co	
1. The name of the issuer is to be inserted in the blank space on line 1 of Unifor 2. The type of person executing the Form is to be described by striking out the inserting a description of the person in the blank space provided on line 2 of the	inapplicable nomenclature in lines 2-4 and, if appropriate, by
3. The name of the jurisdiction under which the issuer was formed or is to be fo	ermed is to be inserted in the blank space on line 3 of the Form.
4. The person to whom a copy of any notice, process of pleading which is served in the appropriate blank spaces at the end of page 1 of the Form.	I pursuant to the Consent to Service of Process is to be inserted
5. An "X" is to be placed in the space before the names of all States which the po	erson executing this Form lawfully is appointing the officer of
each State to designated on the Form as its attorney in that State for receipt of st	ervice of process.
6. A manually signed Form must be field with each State requiring a Consent to the laws or regulations of that State and must be accompanied by the exact filing	
7. The Form must be signed by the issuer. If the issuer is a corporation, it should	d be signed in the name of the corporation by an executive offi-
cer duly authorized; if a partnership, it should be signed in the name of the partition or other organization which is not a partnership, the Form should be signed	neisnip by a general partner; and it an unincorporated associa-
the director or management of its affairs.  8. If the Form is mailed, it is advisable to send it by registered or certified mail,	,